

GENERAL CHECKLIST OF BUSINESS PERMITS, LICENSES AND FILINGS

GRANT APPLICANT/GRANTEE NAME

GRANT NAME AND CYCLE

Not Applicable

GRANT NUMBER

Not Applicable

DATE SUBMITTED/UPDATED

Mark (✓ or X) appropriate box on each line below. All lines must be completed.*Note: This list is not all-inclusive. Grant Applicant/Grantee must list other critical permits/licenses/filings not identified below.*

Grant Applicant/Grantee currently holds this valid permit/license/filing				
Grant Applicant/Grantee will modify and/or obtain this permit/license/filing				
This permit/license/filing is not applicable for this grant project or business				
			LOCAL PERMITS, LICENSES & FILINGS	REGULATOR OR ISSUER
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Authority to Construct/Permit to Operate	Air Quality Management District
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Building Construction Permit	City or County
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Business License	City or County
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fictitious Business Name Filing	County
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Land Use Permit/Zoning Clearance/Conditional Use Permit	City or County
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Permit By Rule (PBR) for Permanent HHW Facilities or Temporary Collection Events	City, County or Cal/EPA-DTSC
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste Hauler Permit	City or County
			STATE PERMITS, LICENSES & FILINGS	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Antifreeze, Battery, Oil & Paint (ABOP) Notification	CUPA or Cal/EPA-DTSC
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Corporate, Company or Partnership Filings	Ca. Secretary of State
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hazardous Waste Haulers Permit	Cal/EPA – DTSC
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Industrial Activities Storm Water General Permit	Cal/EPA – SWRCB
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-Profit Organization 501 (C) (3)	Ca. Secretary of State
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Prop. 65 Safe Drinking Water & Toxic Enforcement Act	Cal/EPA – OEHHA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Solid Waste Facilities Permit	Cal/EPA – CIWMB
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	State EPA Identification Number	Cal/EPA – DTSC
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste and Used Tire Hauler Registration	Cal/EPA – CIWMB
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste Discharge Requirements	Cal/EPA – SWRCB
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste Tire Facilities Permit	Cal/EPA – CIWMB
			FEDERAL PERMITS, LICENSES & FILINGS	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	US EPA – Identification Number	US EPA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	US EPA – NPDES and/or NSR Permits	US EPA
			OTHER PERMITS, LICENSES & FILINGS	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

DO NOT submit copies of the permits/licenses/filings with this form. Please retain all permits/licenses/filings in grant file for audit purposes.

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Comments/Notes:

Mark (✓ or X) appropriate box below.

<input type="checkbox"/>	PRIVATE ENTITY CERTIFICATION: I declare under penalty of perjury under the laws of the State of California that the proposed grantee: 1) is in good standing and qualified to do business in the State; and 2) has or will comply with all applicable state, federal, and local laws, ordinances, regulations, license and permit requirements necessary for the proper performance of this grant; and 3) where compliance has not been met, I have attached a letter describing what has been done to achieve full compliance.
<input type="checkbox"/>	PUBLIC ENTITY CERTIFICATION: I declare under penalty of perjury under the laws of the State of California that the proposed grantee: 1) has or will comply with all applicable state, federal, and local laws, ordinances, regulations, license and permit requirements necessary for the proper performance of this grant; and 2) where compliance has not been met, have attached a letter describing what has been done to achieve full compliance.

Executed at: _____ on _____
City and State Date

Print Name of Grant Applicant/Grantee (as identified in resolution) Title

Signature of Grant Applicant/Grantee (as identified in resolution) Date

Note: Falsification under penalty of perjury may result in criminal and civil penalties. In addition, pursuant to the terms of the grant agreement, any misrepresentations in the above certification shall constitute a breach of contract that could result in non-payment of grant funds to the grantee; relinquishment by the grantee of funds previously paid; termination of the grant; and/or placing the grantee on the Board's Unreliable Contractors List.